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**DECLARATION FOR UTILITY OR** 

DECLARATION FOR UTILITY OR DESIGN	First Named Inve	entor Daniel John Hare						
PATENT APPLICATION		COMPLETE IF KNOWN						
(37 CFR 1.63)	Application Num	her						
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Declaration Declaration	Filing Date							
Submitted OR Submitted after Init With Initial Filing (surcharge	ial Art Unit							
Filing (37 CFR 1.16 (e))	Examiner Name							
required)								
I hereby declare that:								
Each inventor's residence, mailing address, and citizen	ship are as stated below	next to their name.						
I believe the inventor(s) named below to be the original	and first inventor(s) of the	he subject matter which is claimed and for						
which a patent is sought on the invention entitled:								
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motorcycle	t Clas	sn bar iiit I						
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(Ti	tle of the Invention)							
the specification of which								
is attached hereto								
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OR.								
OR		District Annual Control of the Contr						
OR was filed on (MM/DD/YYYY)	as United S	States Application Number or PCT International						
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[Page 1 of 2]

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## **DECLARATION** — Utility or Design Patent Application

Direct all correspondence to:	Customer	r Number:	30	245		OR _	] (	Corresp	oondence address below
Name									
Anthony Edw. J Campbell									
Address									
PO Box 160370							_		
City	State ZIP .							ZIP	
Austin	TX 78716-0370					78716-0370			
Country		Telephone				Fax			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST INVENTOR:  A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])		el Joh			F	Family Nan or Surname	ne		lare
Inventor's Signature	OTHO	WO_							Date 12-2-03
Residence: City Oswego	State NY			Count	try			Citizer US	nship
Mailing Address 158 E Utica St									
City	State	NY			ZIP 1	3126			Country US
NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])						amily Nam r Surname			
Inventor's Signature									Date
Residence: City	State		Country			Citizenship			
Mailing Address									
City	State				ZIP			Count	try
Additional inventors or a legal re	presentative are be	ing named on the		suppleme	ntal sh	eet(s) PTO/SI	l B/02A	or 02LR	attached hereto.

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	formation unless it displays a valid OMB control number.
Application Number	
Filing Date	
First Named Inventor	Daniel John Hare
Title	
Art Unit	
Examiner Name	
Attorney Docket Number	RST947

I hereby appoint:							
Practitioners associated with the Customer Number:	30	024	15				
OR .		,		_			
Practitioner(s) named below:							
Name			Registration Nu	mber			
as my/our attorney(s) or agent(s) to prosecute the application	identified above, an	nd to trans	act all business in	the United States Patent and			
Trademark Office connected therewith.	identified above, an	iu to trans	act all business in	the Officed States Faterit and			
Please recognize or change the correspondence address for	the above-identified	applicatio	on to:				
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Telephone		Fax					
I am the:							
Applicanumversion.							
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)							
SIGNATURE of Applicant or Assignee of Record							
Name Daniel John Hare							
Signature Daniel THare							
Date 12-2-03			Telephone				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.							
*Total of forms are submitted.							

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